

Program B: Patient Services

Program Authorization: Act 230 of 1979; Act 390 of 1991

PROGRAM DESCRIPTION

The mission of the Patient Services Program is to meet the medical, nursing, and rehabilitation needs of the residents served, by providing continuous treatment through an array of professional and paraprofessional services as prescribed by the residents' plan of care.

The goals of the Patient Services Program are:

1. To increase the average daily occupancy rate.
2. To control the per resident day operating cost.
3. To control the staff to resident ratio.
4. To increase the average daily census.

The Patient Services Program provides quality nursing care and ancillary services medical care to resident patients. Patient conditions include birth defects, accident trauma, debilitating illnesses, dependency due to old age, stroke, and multiple sclerosis. The facility also provides a comprehensive integrated system of medical care for residents requiring long-term care, nursing care, and rehabilitation services including ventilator assistance. The facility is licensed for 202 beds and staffed to operate 195 beds.

OBJECTIVES AND PERFORMANCE INDICATORS

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2000-2001. Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicator values are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year (the fiscal year of the budget document).

The objectives and performance indicators that appear below are associated with program funding in the Base Executive Budget for FY 2000-01. Specific information on program funding is presented in the financial sections that follow performance tables.

1. (KEY) To maintain an average daily occupancy rate of 90% through closer monitoring of resident's health, the acuity level of new residents and streamlining the admission process.

Strategic Link: This objective and its indicators relate to several Goals and objectives in the strategic plan:

Goal I, Objective I.1: by June 30, 2003 New Orleans Home and Rehabilitation Center, through closer monitoring of resident's health, the acuity level of new residents and streamlining of the admission process, will move toward average daily occupancy rate of 95%;

Goal II, Objective II.1: The New Orleans Home and Rehabilitation Center will maintain the cost per client day at an annual increase of no more than the annual medical inflation rate as set forth by the Office of Planning and Budget through June 30, 2003;

Goal III, Objective III.1: The New Orleans Home and Rehabilitation Center will maintain the staff to client ratio at no more than 1.1:1 through June 30, 2003.

LEVEL	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
		YEAREND PERFORMANCE STANDARD FY 1998-1999	ACTUAL YEAREND PERFORMANCE FY 1998-1999	ACT 10 PERFORMANCE STANDARD FY 1999-2000	EXISTING PERFORMANCE STANDARD FY 1999-2000	AT CONTINUATION BUDGET LEVEL FY 2000-2001	AT RECOMMENDED BUDGET LEVEL FY 2000-2001
S	Average daily census	185	175	183	183	176	176
K	Total clients served	Not applicable ¹	246	Not applicable ²	246	229	229
K	Cost per client day	\$91	\$102	\$91	\$91	\$101	\$104
K	Occupancy rate	95%	90%	95%	95%	90%	90%
S	Staff/Client ratio	1.10	1.01	0.92	0.92	1.10	1.10

¹ This performance indicator did not appear under Act 19 and therefore had no performance standard for FY 1998-99.

² This performance indicator did not appear under Act 10 and therefore had no performance standard for FY 1999-2000.

GENERAL PERFORMANCE INFORMATION					
PERFORMANCE INDICATOR NAME	PRIOR YEAR ACTUAL FY 1994-95	PRIOR YEAR ACTUAL FY 1995-96	PRIOR YEAR ACTUAL FY 1996-97	PRIOR YEAR ACTUAL FY 1997-98	PRIOR YEAR ACTUAL FY 1998-99
Occupancy rate	Not available	Not available	Not available	91	90
Cost per client day	Not available	Not available	Not available	\$95	\$101
Number of staffed beds	Not available	Not available	Not available	195	195
Average length of stay (in days) ¹	Not available	Not available	Not available	Not available	475 ²
Total number of clients served	Not available	Not available	Not available	180	246 ³

¹ This figure may be slightly higher when compared to other facilities because this is a long term care facility.

² This figure is based on the time between the most recent admission date and now. The actual length of stay is longer if computed from the initial admission date.

³ The increase over prior years is due to adoption of a different, standardized calculation.

RESOURCE ALLOCATION FOR THE PROGRAM

	ACTUAL 1998-1999	ACT 10 1999- 2000	EXISTING 1999- 2000	CONTINUATION 2000 - 2001	RECOMMENDED 2000 - 2001	RECOMMENDED OVER/(UNDER) EXISTING
MEANS OF FINANCING:						
STATE GENERAL FUND (Direct)	\$0	\$0	\$0	\$0	\$0	\$0
STATE GENERAL FUND BY:						
Interagency Transfers	3,082,535	3,986,497	3,986,497	4,153,474	4,539,950	553,453
Fees & Self-gen. Revenues	640,929	834,434	834,434	883,834	1,047,859	213,425
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
FEDERAL FUNDS	75,509	368,660	368,660	384,866	350,159	(18,501)
TOTAL MEANS OF FINANCING	\$3,798,973	\$5,189,591	\$5,189,591	\$5,422,174	\$5,937,968	\$748,377
EXPENDITURES & REQUEST:						
Salaries	\$2,609,416	\$3,070,589	\$3,070,589	\$3,262,427	\$3,743,337	\$672,748
Other Compensation	87,287	25,000	25,000	25,000	25,000	0
Related Benefits	333,622	390,872	390,872	428,013	515,375	124,503
Total Operating Expenses	284,504	1,045,812	1,045,812	1,068,050	1,021,474	(24,338)
Professional Services	161,506	227,000	227,000	232,902	227,000	0
Total Other Charges	300,165	347,731	347,731	347,731	347,731	0
Total Acq. & Major Repairs	22,473	82,587	82,587	58,051	58,051	(24,536)
TOTAL EXPENDITURES AND REQUEST	\$3,798,973	\$5,189,591	\$5,189,591	\$5,422,174	\$5,937,968	\$748,377
AUTHORIZED FULL-TIME						
EQUIVALENTS: Classified	172	172	172	172	169	(3)
Unclassified	0	0	0	0	0	0
TOTAL	172	172	172	172	169	(3)

A supplementary recommendation of \$161,583, of Interagency Transfers, is included in the Total Recommended for this program. It represents full funding of the payments from Medical Vendor Payments program for payments to public providers for the Medically Needy Program payable out of revenues generated from a new tax source. This item is contingent upon Revenue Sources in excess of the Official Revenue Estimating Conference Forecast subject to Legislative approval and recognition by the Revenue Estimating Conference.

SOURCE OF FUNDING

The Patient Services Program is funded with Interagency Transfers, Fees and Self-generated Revenues, and Title XVIII federal funds (Medicare). Interagency Transfer means of financing represents Title XIX reimbursement for services provided to Medicaid eligible patients received from the Department of Health and Hospitals, Medical Vendor Payments Program. Fees and Self-generated Revenue include: (1) payments from patients for services based on a sliding fee scale; (2) employee meal reimbursement; and (3) miscellaneous income, such as funds received from the Veterans Administration for contract services provided. Federal Funds are Title XVIII for services provided to medicare eligible patients.

ANALYSIS OF RECOMMENDATION

GENERAL FUND	TOTAL	T.O.	DESCRIPTION
\$0	\$5,189,591	172	ACT 10 FISCAL YEAR 1999-2000
			BA-7 TRANSACTIONS:
\$0	\$0	0	None
\$0	\$5,189,591	172	EXISTING OPERATING BUDGET – December 3, 1999
\$0	\$100,353	0	Annualization of FY 1999-2000 Classified State Employees Merit Increase
\$0	\$102,359	0	Classified State Employees Merit Increases for FY 2000-2001
\$0	\$58,051	0	Acquisitions & Major Repairs
\$0	(\$82,587)	0	Non-Recurring Acquisitions & Major Repairs
\$0	\$762,516	0	Salary Base Adjustment
\$0	(\$177,067)	0	Attrition Adjustment
\$0	(\$41,515)	(3)	Personnel Reductions
\$0	\$26,267	0	Other Adjustments - Increase in Medical GS (pay grade) levels per Civil Service
\$0	\$0	0	Net Means Of Financing Substitutions - Replace \$74,697 of federal funds with fees and self-generated revenue to reflect budgeted amounts
\$0	\$5,937,968	169	TOTAL RECOMMENDED
\$0	(\$161,583)	0	LESS GOVERNOR'S SUPPLEMENTARY RECOMMENDATIONS
\$0	\$5,776,385	169	BASE EXECUTIVE BUDGET FISCAL YEAR 2000-2001
			SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL:
\$0	\$0	0	None
\$0	\$0	0	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL
			SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE:
\$0	\$161,583	0	A supplementary recommendation of \$161,583, of Interagency Transfers, is included in the Total Recommended for this program. It represents full funding of the payments from Medical Vendor Payments program for payments to public providers for the Medically Needy Program payable out of revenues generated from a new tax source. This item is contingent upon revenue sources subject to Legislative approval and recognition by the Revenue Estimating Conference.

\$0	\$161,583	0	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE
\$0	\$5,937,968	169	GRAND TOTAL RECOMMENDED

The total means of financing for this program is recommended at 114.4% of the existing operating budget. It represents 96.4% of the total request (\$6,158,901) for this program. The major changes reflected in the analysis of recommendation include: full funding has been provided for all 169 recommended positions and an adjustment to reflect an anticipated attrition factor of 4% totaling \$746,746 (\$564,904 Interagency Transfer, \$128,803 Fees & Self-generated Revenue, \$53,039 Federal Funds); a net decrease in acquisitions and major repairs totaling \$24,536 (-\$37,718 Interagency Transfer \$9,925 Fees & Self-generated Revenues, and \$3,257 Federal Funds); and an increase in salaries of \$26,267 in Interagency Transfer for Civil Service medical (G.S.) pay grade levels.

PROFESSIONAL SERVICES

\$7,933	Dietician - Dietary Consultant
\$1,686	Medical Records Consultant
\$32,461	Medical Director
\$30,505	Staff Physician
\$5,795	Podiatrist
\$8,089	Dental Services
\$3,050	Pharmacy Services
\$12,520	Respiratory Consultant
\$37,105	Physical Therapy
\$49,472	Physical Therapy
\$38,384	Occupational Therapy
\$227,000	TOTAL PROFESSIONAL SERVICES

OTHER CHARGES

\$347,731	Provider Based Fee - Paid to the Department of Health and Hospitals based on the number of occupied beds
\$347,731	TOTAL OTHER CHARGES

ACQUISITIONS AND MAJOR REPAIRS

\$58,051	Recommended level of funding for the replacement and repairs of obsolete, inoperable or damaged equipment and buildings
\$58,051	TOTAL ACQUISITIONS AND MAJOR REPAIRS